Modified Version of PTO/SB/21

<i>[</i> ]			Approved for use through 07/31.	/2000	
FEE TRANSMITTAL for FY 2005		Application Number	10/033097		
		Filing Date	10/19/2001	<u>,                                    </u>	
		First Named Inventor	Jonathan Wu		
		Art Unit	2143		
Applicant claims small entity status. See CFR 1.27.		Examiner Name	BOUTAH, ALINA A		
TOTAL AMOUNT OF PAYMENT \$225		Attorney Docket Number	JWU-101/US		

		METHO	OF PAYM	ENT ( <i>Che</i>	ck all that app	nly)	
☐ A check or mo	oney ord	er is enclosed to	cover the fi	ling fees.			
■ Payment by c	redit care	d. Form PTO-20	)38 is attach	ied.			
			FEE C	ALCULAT	ION		
1. Basic Filing, Se	earch an	d Examination	Fees				
	Filing F	ees	Search	Fees	Examir	nation Fees	Fees Paid (\$)
Application Type:	Fee(\$)	Fee(\$) Small Entity	Fee(\$)	Fee(\$) Small Entit	* * *	Fee(\$) Small Entity	
Utility	300	150	500	250	200	100	\$0
Design	200	100	100	50	130	65	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2.1 Each claim over 2.2 Each independer 2.3 Multiple depender Total Claims	nt claim over the claims	ver 3. or for reissu	es, each inde entity)		im more than in t		\$200 (\$100 small entity
-					\$50 (\$25)		\$0
Indep. Claims	Thr	eshold	Extra (	<del></del>	\$50 (\$25) Fee (\$)		<u>\$0</u>
Indep. Claims	Thr - 3	eshold =	Extra (	<del></del>			\$0 \$0
Indep. Claims Multiple Dep. Cl	- 3		Extra	Claims	Fee (\$)		
Multiple Dep. Cl  3. Application Siz If the specification ar additional 50 sheets	- 3 laims  e Fee nd drawing or fraction	gs exceed 100 she n thereof (round up	eets of paper.	Claims  X  the applica mber). See	Fee (\$) \$200 (\$100) Fee (\$) \$360 (\$180) tion size fee due USC 41(a)(1)(G	is \$250 (\$125 for s and 37 CFR 1.16	\$0  small entity) for each
Multiple Dep. Cl  3. Application Siz If the specification ar additional 50 sheets Total Sheets	- 3 laims ze Fee nd drawing or fraction	= as exceed 100 she	eets of paper, to whole nur	Claims  X  the applica mber). See Fee (\$)	Fee (\$) \$200 (\$100) Fee (\$) \$360 (\$180) tion size fee due USC 41(a)(1)(G	is \$250 (\$125 for : ) and 37 CFR 1.16	\$0  small entity) for each
Multiple Dep. Cl  3. Application Siz If the specification ar additional 50 sheets Total Sheets	- 3 laims  ze Fee nd drawing or fractior  Ex	gs exceed 100 she thereof (round up tra Sheets /50 =	eets of paper, o to whole nur	the applicamber). See	Fee (\$) \$200 (\$100) Fee (\$) \$360 (\$180) tion size fee due USC 41(a)(1)(G	is \$250 (\$125 for s ) and 37 CFR 1.16	\$0 small entity) for each (s).

SIGNATURE		Kondand		
PRINTED NAME	Ron Jacobs		TELEPHONE	650-424-0100
DATE	7/17/07		REGISTRATION NUMBER	50,142

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.11 and 1.14.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

07/19/2007 SLUANG1 00000007 10033097

6	OIP E 40	Application Number	10/033097
	TRANSMITTAL	Filing Date	10/19/2001
1/	الع 1 <sup>007</sup> و 1 الد	First Named Inventor	Jonathan Wu
4	<i>H</i> .7	Art Unit	2143
	to be used to all correspondence after initial filing)	Examiner Name	BOUTAH, ALINA A
	otal Number of Pages in This Submission	Attorney Docket Number	JWU-101/US

ENCLOSURES (Check all that apply)					
Fee Transmittal	Form	☐ Drawings	After Allowance Comm. to TC		
☑ Fee Attached		Licensing-related papers	Appeal Comm. to Board of Appeals and Interferences		
☐ Amendment/Reply		Petition	Appeal Comm. to TC (Appeal Notice, Brief, Reply Brief)		
☐ After Final		Petition to Convert to a Provisional Application	☐ Proprietary Information		
☐ Affidavits/Declaration(s)		Power of Attorney, Revocation Change of Corresp. Address	☐ Status Letter		
■ Extension of Time Request		☐ Terminal Disclaimer	☐ Other (Specified below)		
☐ Express Abando	onment Request	☐ Request for Refund			
☐ Information Disclosure Statement		CD, Number of CD(s)			
☐ Certified Copy of Priority Doc(s)		☐ Landscape Table on CD			
Reply to Missing Parts/ Incomplete Application		Other:			
Reply to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
FIRM NAME LUMEN INTELLECTUAL PROPERTY SERVICES, Inc.					
SIGNATURE	SIGNATURE ROLLING				
PRINTED NAME Ron Jacobs					
DATE 7/17/07		REGISTRA	TION NUMBER 50,142		
CERTIFICATE OF TRANSMISSION/MAILING					
I hereby certify that this correspondence is being fascimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:					
SIGNATURE	IGNATURE (Sharlong)				
PRINTED NAME	AME Abigail Capulong				
DATE	7/17/07				